Case 17-00551 Doc 1 Filed 01/09/17 Entered 01/09/17 14:44:31 Desc Main Document Page 1 of 54 D STATES BANKRUPTCY COURT Fill in this information to identify your case: NORTHERN DISTRICT OF ILLINOIS . United States Bankruptcy Court for the: JAN 0 9 2017 Northern District of Illinois Case number (# known): Chapter you are filing under: JEFFREY P. ALLSTEADT, CLERK Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 Check if this is an amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct (if known). Answer every question.

information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number

Pa	It 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
١.	Your full name		
	Write the name that is on your	Mona	
	government-issued picture identification (for example,	First name	First name
	your driver's license or	Lisa	- normality
	passport).	Middle name	Middle name
	Bring your picture	Davis	Middle Harife
	identification to your meeting with the trustee.	Last name	Last name
wan the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
23 000	All other names you	and the matter a_0 and	经分类分词 化多数分离 化二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
h Thinks	The Control of the Co	BROGERT CTTTAN COMMISSION TO THE COMMISSION TO A COMMISSION TO A COMMISSION TO A COMMISSION TO A COMMISSION TO	killesissis-men tääntön 1907 toss "myn, vaymistaksi jälmyksissisisministan soksatoksik, k. s. 1700 ossatoksillesis-tertoonat vin pamineesistissasse
	Only the last 4 digits of your Social Security	xxx - xx - 2 0 4 4	xxx - xx
	number or federal	OR .	OR
1	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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De	ebtor 1 Mona L.	Davis		Case number (# known)	
	First Name Middle No	me Last Name			
n de la compositación de la co	BOY AND SEASON OF THE RESEARCH ASSOCIATION OF THE RESEARCH SEASON OF THE RESEARCH ASSOCIATION OF THE RESEARCH SEASON OF THE		handusaliinkereliikki oleephikorelikki oleephisi	## (POTAL) 1 (\$1.18 POTAL) POTAL P	englaggin sammiganet ockar geothelen
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint	: Case):
4.	Any business names	I have not used any business	s names or EINs.	I have not used any business names o	or EINs.
	and Employer Identification Numbers	The Character and any oddines.		,,	
	(EIN) you have used in				
	the last 8 years	Business name		Business name	
	Include trade names and				
	doing business as names	Business name		Business name	
		EIN	NAMES OF THE PERSON NAMES	EIN	
		EIN		EIN	
NAME:		n Energiae christa (18 contection) of the season of the Contection (18 contection) (18 contect	gregories (Astronomic Paris) (Astronomic Paris) (Astronomic Paris)	THE STANDARD STANDARD CONTROL TO THE STANDARD STA	
5.	Where you live			If Debtor 2 lives at a different address:	
		7151 S. Richmond			
		Number Street		Number Street	

		Chicago	IL 6062	9	
		City	State ZIP Cod		ZIP Code
		Cook			
		County		County	
		If your mailing address is diffe	orant from the one	If Debtor 2's mailing address is differen	nt from
		above, fill it in here. Note that I	the court will send	yours, fill it in here. Note that the court w	ill send
		any notices to you at this mailing	g address.	any notices to this mailing address.	
		Number Street		Number Street	Anna
		P.O. Box		P.O. Box	
		City	State ZIP Cod	le City State	ZIP Code
0.0007.000	and the second s	a yangga Jegermandismin ku misi Kisma di misi a manga-ka misi Kisma ka manga di misi manga manga ka misi ka mi	en e		partered to the first of the control
		Charlenne		Check one:	
6.	Why you are choosing this district to file for	Check one:			- 122
	bankruptcy	Over the last 180 days befor I have lived in this district lor	re filing this petition, noer than in anv	Over the last 180 days before filing this I have lived in this district longer than in	s petition, n any
		other district.	,	other district.	-
		☐ I have another reason. Expla	ain.	I have another reason. Explain.	
		(See 28 U.S.C. § 1408.)		(See 28 U.S.C. § 1408.)	
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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De	ebtor 1 Mona First Name	A L. Middle Na		Davis Last Name			Case number (if k	nown)		
P	art 2: Tell the	Court Abo	out Your E	Sankruptcy C	ase					
7.	The chapter of Bankruptcy Co		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
		choosing to file	☑ Cha	pter 7	-					
	unacı		☐ Cha	pter 11						
			☐ Cha	pter 12						
			☐ Cha	pter 13						
8.	How you will pa	ay the fee	loca your subi with I ne App I rec By I less pay	I court for mon- rself, you may mitting your pa a pre-printed. ed to pay the lication for Indi- quest that my aw, a judge ma than 150% of the fee in insta	e details about how pay with cash, cash syment on your behinderess. fee in installments ividuals to Pay The fee be waived (Your, but is not require the official poverty)	you neier's calf, you salf, you salf	nay pay. Typical check, or money ur attorney may u choose this op Fee in Installme request this opt waive your fee, at applies to you mis option, you m	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check stion, sign and attach the nts (Official Form 103A). ion only if you are filing for Chapter 7. and may do so only if your income is a family size and you are unable to ust fill out the Application to Have the with your petition.		
9.	Have you filed bankruptcy wit		☑ No							
	last 8 years?		☐ Yes.	District		When	MM / DD / YYYY	Case number		
				District	751010000000000000000000000000000000000	When		Case number		
				District		When				
				District		vviieii	MM / DD / YYYY	Case number		
10.	Are any bankru	ptcy	☑ No							
	cases pending filed by a spous		Yes.	Debtor				Relationship to you		
	not filing this co you, or by a but partner, or by a affiliate?	ase with siness		District		When	MM / DD / YYYY	Case number, if known		
	diffidle			Debtor				Relationship to you		
								Case number, if known		
	aksiya yiyan yili a akan yangi lang kang kanali sa mahamana malamis						MM / DD / YYYY			
11.	Do you rent you residence?	ır	☑ No. ☐ Yes.	Go to line 12. Has your landle residence?	ord obtained an evictio	on judg	ment against you i	and do you want to stay in your		
				No. Go to li	ine 12.					
					t <i>Initial Statement Abo</i> ptcy petition.	out an I	Eviction Judgment	Against You (Form 101A) and file it with		

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otor 1	Mona First Name	L. Middle Nam		Davis Last Name		Case n	umber (if knowi	n)	
t 3:	Report Abou	ıt Any E	Busines	ses You Own as a	a Sole Propri	etor			
	ou a sole proj		🗷 No.	Go to Part 4.					
of any full- or part-time business? A sole proprietorship is a		time	☐ Yes	. Name and location	of husiness				
		а			***************************************				
	ss you operate a lal, and is not a	as an		Name of business, if a	ny			Alexandra management of the second se	
separat	te legal entity su ration, partners								
LLC.	ration, partners	ilip, ui		Number Street				**************************************	
	ave more than oprietorship, use								
	e sheet and atta								
to true h	енцоп.			City			State	ZIP Code	
				Check the appropria	ate box to descr	ribe your business:			
				☐ Health Care Bus	iness (as defin	ed in 11 U.S.C. § 1	01(27A))		
				☐ Single Asset Re	al Estate (as de	efined in 11 U.S.C.	§ 101(51B))	
				☐ Stockbroker (as	defined in 11 U	J.S.C. § 101(53A))			
				☐ Commodity Brok	ter (as defined i	in 11 U.S.C. § 101(6))		
				None of the above	ve				
debtor For a de busines	u a small bus? ? efinition of small s debtor, see C. § 101(51D).		No.	nese documents do n I am not filing under I am filing under Cha the Bankruptcy Code	Chapter 11.		·	or according to the definition in	
			Yes.	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Do you proper alleged	Report if You own or have ty that poses to pose a the inent and	any or is	⊘ No	Any Hazardous Provided the Any Hazardous Provided the Any Hazardous Provided the Any Haz		ny Property Tha	t Needs I	mmediate Attention	
identifi public Or do y	able hazard to health or safe you own any ty that needs	_							
	iate attention	?		If immediate attention	on is needed, w	hy is it needed?			
perishab that mus	nple, do you ow. le goods, or live t be fed, or a bu ds urgent repair:	stock iilding							
				Where is the proper	ty? Number	Street			

					City			State ZIP Code	

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Debtor 1	Mona First Name	L. Middle Name	Davis Last Name	Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debto	r 1
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You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	bout
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	Mona L.	Davis	Case number (#	known)
Part 6:	Answer These Qu	estions for Reporting Purpo	oses	
16. What k	ind of debts do	16a. Are your debts prima as "incurred by an individ	arily consumer debts? Consumer de lual primarily for a personal, family, or ho	abts are defined in 11 U.S.C. § 101(8) usehold purpose."
·		No. Go to line 16b.✓ Yes. Go to line 17.		
		16b. Are your debts prima money for a business or i	arily business debts? Business debt investment or through the operation of th	s are debts that you incurred to obtain e business or investment.
		□ No. Go to line 16c.□ Yes. Go to line 17.		
		16c. State the type of debts yo	ou owe that are not consumer debts or bu	usiness debts.
7. Are you Chapter	filing under 77	☐ No. I am not filing under C	Chapter 7. Go to line 18.	The Additional Process of the Section 1 of the Sec
any exe exclude adminis are paid available	estimate that after mpt property is d and trative expenses that funds will be for distribution cured creditors?	Yes. I am filing under Chap administrative expens	eter 7. Do you estimate that after any exe es are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?
	ny creditors do	1-49	1,000-5,000	25,001-50,000
you esti owe?	stimate that you	☐ 50-99 ☐ 100-199 ☐ 200-999	5,001-10,000 10,001-25,000	50,001-100,000 More than 100,000
estimate be worth	your assets to	\$2 \$0.\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
to be?	your liabilities	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
a rt 7: S igor Or you	gn Below	I have examined this petition, an	nd I declare under penalty of perjury that	the information provided is true and
or you		If I have chosen to file under Cha	apter 7, I am aware that I may proceed, i understand the relief available under eac	feligible under Chapter 7, 44,49, or 49
		If no attorney represents me and this document, I have obtained a	I I did not pay or agree to pay someone vend read the notice required by 11 U.S.C.	who is not an attorney to help me fill out § 342(b).
		I request relief in accordance wit	h the chapter of title 11, United States Co	ode, specified in this petition.
		I understand making a false state with a bankruptcy case can resul 18 U.S.C. §§ 152, 1341, 1519, and 15 U.S.C.	It in tines up to \$250,000, or imprisonmer	money or property by fraud in connection nt for up to 20 years, or both.
		* Mora Da	vil ×	
		Signature of Debtor 1 Executed on MM / DD / V	Signature Executed	
ONE CONTRACTOR OF THE OWNER.	kolimikas palatikojo programa programa programa programa.		F III	MM / DD / YYYY

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Debtor 1	Mona First Name	Middle Name	<u>Davi</u>	IS Name		Case number (if known)_			
For you i bankrupt attorney	if you are filintery without a	ng this	themsel	understand tha Ives successfu	it many people find i Ily. Because bankru	it extremely diffic ptcv has long-ter	m financial and lenal		
an attorn	e represented ley, you do n ile this page.	ot [*]	Consequences, you are strongly urged to hire a qualified attorney. To be successful, you must correctly file and handle your bankruptcy case. The rules are technical, and a mistake or inaction may affect your rights. For example, your case may lidismissed because you did not file a required document, pay a fee on time, attend a mee hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator firm if your case is selected for audit. If that happens, you could lose your right to file and case, or you may lose protections, including the benefit of the automatic stay.						
			You must court. Eve in your so property o also deny case, suc cases are	t list all your proper if you plan to perhedules. If you do properly claim you a discharge that destroying controlled and only audite	erty and debts in the so pay a particular debt ou o not list a debt, the de it as exempt, you may of all your debts if you or hiding property, falsif	chedules that you a utside of your bankr but may not be discl not be able to keep do something dish- ying records, or lying rs have been accur	re required to file with the ruptcy, you must list that debt harged. If you do not list the property. The judge can onest in your bankruptcy ag. Individual bankruptcy rate, truthful, and complete		
			If you dec hired an a successfu Bankruptc	ide to file without attorney. The coul If, you must be fa by Procedure, and	an attorney, the court rt will not treat you diffe miliar with the United S	expects you to follo grently because you States Bankruptcy C court in which your	ow the rules as if you had u are filing for yourself. To be Code, the Federal Rules of case is filed. You must also		
			Are you av consequer No Yes	ware that filing for nces?	r bankruptcy is a seriou	is action with long-t	term financial and legal		
			Are you av	vare that bankrup or incomplete, yo	otcy fraud is a serious o ou could be fined or im	crime and that if you prisoned?	ur bankruptcy forms are		
			Did you pa No Yes. Na	me of Person Ve	ronica Eason		ou fill out your bankruptcy forms? ignature (Official Form 119).		
			have read a	and understood ti	dge that I understand this notice, and I am aw ose my rights or proper	are that filing a ban	filing without an attorney. I akruptcy case without an ly handle the case.		
		×	<u>40</u>	na La	Ň	*			
			Signature of Date	Debtor 1 $\frac{19}{MM/DD} \frac{30}{1999}$	Π	Signature of De	MM / DD / YYYY		
			Contact phone	a		Contact phone	WWW. OD / FFF		
		1	Cell phone	(773) 653-15	i01	Cell phone			
			Email address	monadavis70	373@gmail.com	Email address			

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Fill in this information to identify your case:					
Debtor 1	Mona	L,	Davis		
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court fo	r the: Northern District	of Illinois		
Case number					
	(if known)				

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ 0.00
1ь. Copy line 62, Total personal property, from Schedule A/В	s3,000.00
1c. Copy line 63, Total of all property on Schedule A/B	0.000.00
	\$3,000.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ <u>11,924.00</u>
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 31,283.00
Wassand Park 1999	\$ 43,207.00
Your total liabilities	\$ 40,207.00
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$1,775.00
Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$1,730.00

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Deb	otor 1	Mona First Name	L. Middle Name	Davis .ast Name		Case number (if known)	
		_					
Pa	rt 4:	Answer Thes	se Questions for	Administrative and St	atistical Record	Is	
6.	Are ye	ou filing for bank	kruptcy under Chap	ters 7, 11, or 13?			
	No Vi	o. You have nothires	ng to report on this p	art of the form. Check this	box and submit this	form to the court with your othe	r schedules.
7. 1	What I	kind of debt do y	ou have?				
	☑ Yo	our debts are prin nily, or household	marily consumer de purpose." 11 U.S.C	bts. Consumer debts are to \$ 101(8). Fill out fines 8-9	hose "incurred by a g for statistical purp	n individual primarily for a persooses. 28 U.S.C. § 159.	onal,
	☐ Yo	ur debts are not		r debts. You have nothing		rt of the form. Check this box ar	nd submit
8.]	From t	the Statement of	Your Current Mont	hly Income: Copy your tot	al current monthly in	ncome from Official	
ŀ	-orm 1	122A-1 Line 11; O	R, Form 122B Line	1; OR , Form 122C-1 Line	14.		\$2,664.00
ninterper,	FOR DESIGNATION AND A		er en	is A to such as the A -matrix polymetric particles when a and a in table we are now	fartiðati í MANSEL, skrinnin í í í í í í í í í í í í í í í í í	terform of the first of the following states of the second states of the second states of the second states of	ter de la servicio de la companya del companya de la companya de la companya del companya de la companya del la companya de la
9. C	opy ti	he following spe	cial categories of c	laims from Part 4, line 6 (of Schoolule E/E		
	.,		our outogonoo o, o	and front at 4, me o	n Schedule E/F.		
						Total claim	
	From	Part 4 on Sched	lule E/F, copy the fo	blowing:			
9.	a. Don	nestic support obli	igations (Copy line 6	a.)		\$0.00	
91	b. Taxı	es and certain oth	er debts you owe th	e government. (Copy line 6	ib.)	\$0.00	
90	c. Clair	ms for death or pe	ersonal injury while y	ou were intoxicated. (Copy	line 6c.)	\$	
90	d. Stud	lent loans. (Copy	line 6f.)			\$13,657.00	:
96	e. Oblig prior	gations arising out ity claims. (Copy l	t of a separation agr line 6g.)	eement or divorce that you	did not report as	\$0.00	: :
9f	. Debt	ts to pension or pr	rofit-sharing plans, a	nd other similar debts. (Co	py line 6h.)	+ \$ 0.00	: !
9g	ı. Tota	I. Add lines 9a thr	rough 9f.			\$ 13,657.00	

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Fill in 1	his informat	ion to identify	our case and	this filing:		
Debtor	Mona		L.	Davis		
	First Nam	e	Middle Name	Last Name		
Debtor 2 (Spouse,	if filing) First Name	9	Middle Name	Last Name		
United S	States Bankrupt	cy Court for the: N	lorthern District	of lilinois		
Case nu	mber		····			
						Check if this is an
Offic	cial Form	n 106A/B				amended filing
			-			
		e A/B:		ms. List an asset only once. If an asset fits in more		12/15
write you Part 1: 1. Do yo	Describe	d case number Each Reside	(if known). An	plete and accurate as possible. If two married peop more space is needed, attach a separate sheet to t swer every question. g, Land, or Other Real Estate You Own or Ha rest in any residence, building, land, or similar pro	this form. On the top of	any additional pages,
	o. Go to Part	2. the property?				
1.1.	Street address	s, if available, or o	ther description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any securic Creditors Who Have Clair Current value of the entire property? \$ 0.00 Describe the nature interest (such as fee the entireties, or a life	Current value of the portion you own? \$ 0.00 of your ownership simple, tenancy by e estate), if known.
				At least one of the debtors and another	(see instructions)	
				Other information you wish to add about this it property identification number:	em, such as local	
12		nore than one, I		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
ì	City	Sta	te ZIP Code	☐ Land ☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one.	\$ 0.00 Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by
ē	County			Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this itemproperty identification number:	Check if this is cor (see instructions) n, such as local	nmunity property

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Debto	_{r1} Mona	L.	Davie		
		dle Name Last Name	Case number	d known)	
1.	3Street address, if availat	ole, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	the amount of any secur Creditors Who Have Cla	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
			Condominium or cooperative	Current value of the entire property?	Current value of the
			Manufactured or mobile home	s 0.00	portion you own? s 0.00
			Land Investment property	5	\$
	City	State ZIP Code	☐ Timeshare ☐ Other	Describe the nature interest (such as fee the entireties, or a lit	simple, tenancy by
			Who has an interest in the property? Check one.		
	County		Debtor 1 only		
	County		Debtor 2 only	-	
			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this it property identification number:	em, such as local	
Part 2:	Describe Your V own, lease, or have leg that someone else drive s, vans, trucks, tractors	Vehicles Jel or equitable intereses. If you lease a vehicles, sport utility vehicles.		not? Include any vehicles	\$ 0.00
3.1,	Make:	Nissan	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Altima	Debtor 1 only	the amount of any secured Creditors Who Have Claim	f claims on Schedule D; as Secured by Property.
	Year:	2012	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:		At least one of the debtors and another	entire property?	portion you own?
	Other information;		The load one of the deptors and another		
			☐ Check if this is community property (see instructions)	\$8,766.00	\$0.00
If you	own or have more than	one, describe here:			
3.2.	Make:	*************	Who has an interest in the property? Check one.	Do not deduct secured clai	
	Model:		Debtor 1 only	the amount of any secured Creditors Who Have Claim.	
	Year:		Debtor 2 only		
	Approximate mileage:		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:		At least one of the debtors and another		
	vasc ratification.		☐ Check if this is community property (see instructions)	\$ 0.00	\$

Page 12 of 54 Document Mona Debtor 1 Davis Case number (if known)_ First Name Middle Nam Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D. Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00 ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: 34 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **Ø** No Yes Who has an interest in the property? Check one Make: 41 Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see 0.00 0.00 instructions) if you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the entire property? Other information: portion you own? At least one of the debtors and another 0.00 0.00 Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 0.00 you have attached for Part 2. Write that number here

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Last Name

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Debtor 1

Mona
First Name

Davis

Case number (if known)_

De	you own or have any	legal or equitable interest in any of the following items?	portion	value of the you own? educt secured claims
6.	Household goods and		or exemp	uons.
		ances, furniture, linens, china, kitchenware		
	No Doorite			
	Yes. Describe		\$	1,500.00
7.	Electronics		J	
		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
	No Yes. Describe			
	res. Describe		\$	500.00
8.	Collectibles of value	Electronics		
	Examples: Antiques and stamp, coin, No	d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe			0.00
			\$	0.00
	☑ No	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
1	Yes. Describe		\$	0.00
£	i irearms Examples: Pistols, rifles, 7 No	shotguns, ammunition, and related equipment		
	Yes. Describe		\$	0.00
1. C	lothes			
E	<i>xamples:</i> Everyday clot 1 No	hes, furs, leather coats, designer wear, shoes, accessories		
5	Yes. Describe	Clothings	\$	1,000.00
2. J e	weiry		- sp qu	
	goia, silvei	ełry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	No Yes. Describe		\$	0.00
3. N +	on-farm animals			- Andrew Agents
E.	k <i>amples:</i> Dogs, cats, bir	ds, horses		
	No ,			
	Yes. Describe		\$	0.00
. Ar	y other personal and	household items you did not already list, including any health aids you did not list		
	l No			
	Yes. Give specific		1	0.00
	information		\$	0.00
. Ac	ld the dollar value of a	Il of your entries from Part 3, including any entries for pages you have attached		3 000 00
fo	Part 3. Write that nun	nber here	3	3,000.00

Document

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Debtor 1

M	lor	าล

Middle Name

Davis

Case number (# known)

Doybu Own or nave a	iny legal or equitable interest	in any of the following?		portion y	uct secured clai
16. Cash <i>Examples:</i> Money yo	Ou have in your wallet in your h	Omo in a cofe dense't be		or exemption	ліь,
2 No	- a navo si your wanet, ii your n	ome, in a safe deposit box, and on hand when you file	your petition		
		C.			
		Ca	ish:	\$	0.00
☑ No	, , , , , , , , , , , , , , , , , , , ,	ounts; certificates of deposit; shares in credit unions, br multiple accounts with the same institution, list each.	rokerage houses.		
☐ Yes		Institution name:			
	17.1. Checking account:	Bank Of America		e	0.00
	17.2. Checking account:			Φ	0.00
	17.3. Savings account:			\$	0.00
	17.4. Savings account:			\$	
	17.5. Certificates of deposit:			\$	0.00
	17.6. Other financial account:			\$	0.00
	17.7. Other financial account:			\$	0.00
	17.8. Other financial account:			\$	0.00
	17.9. Other financial account:			\$	0.00
	Suid illiandal account		· · · · · · · · · · · · · · · · · · ·	\$	0.00
Examples: Bond funds, No	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts			
	440.4			\$	0.00
				\$	0.00
				\$	0.00
Non-publicly traded st an LLC, partnership, a	ock and interests in incorpor nd joint venture	ated and unincorporated businesses, including an	interest in		
☑ No	Name of entity:	% of c	wnership:		
Yes. Give specific information about		0%			0.00
them		0%			0.00
	VALUE	0%	% \$		0.00

Case 17-00551 Doc 1 Filed 01/09/17 Entered 01/09/17 14:44:31 Desc Main Page 15 of 54 Document Debtor 1 Davis First Name Case number (if known) 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific Issuer name: information about them..... 0.00 0.00 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: 0.00 Pension plan: 0.00 IRA: 0.00 Retirement account: 0.00 Keogh: 0.00 Additional account: 0.00 Additional account: 0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others 2 No ☐ Yes..... Institution name or individual: Electric: 0.00 Gas: 0.00 Heating oil: 0.00 Security deposit on rental unit: 0.00 Prepaid rent: 0.00 Telephone: 0.00 Water: 0.00 Rented furniture: 0.00 Other: 0.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **☑** No Yes Issuer name and description: 0.00 0.00 0.00

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Page 17 of 54 Document Mona Debtor 1 Davis First Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **Ø** No Yes. Name the insurance company Company name: of each policy and list its value... Beneficiary: Surrender or refund value: 0.00 0.00 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes, Give specific information..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim. 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Z No Yes. Describe each claim. 0.00 35. Any financial assets you did not already list No No ☐ Yes. Give specific information..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 0.00 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Part 5: 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned Z No Yes, Describe.... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe.... 0.00

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Page 19 of 54 Document Mona Debtor 1 Case number (if known) First Name 48. Crops—either growing or harvested Z No ☐ Yes. Give specific information..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Z No ☐ Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed Q Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list Z No Yes. Give specific information..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No Yes. Give specific 0.00 information..... 0.00 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 0.00 57. Part 3: Total personal and household items, line 15 3,000.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 0.00 62. Total personal property. Add lines 56 through 61. 3,000.00 Copy personal property total -> + \$ 3.000.00 63. Total of all property on Schedule A/B. Add line 55 + line 62. 3,000.00

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000001	Mona L.	Davis		
Debtor 2	Mid	die Name Last Nam	e	
(Spouse, if filing)	1110	dle Name Last Nam	e	
	ankruptcy Court for the: Norther	n District of Illinois		
Case number (If known)				☐ Check if this is
				amended filing
fficial Fo	orm 106C			
chedu	le C: The P	roperty You	ı Claim as Exemp	1
as complete a ng the propen ice is needed,	ind accurate as possible. If to you listed on Schedule A/	two married people are filing	together, both are equally responsible fo D6A/B) as your source, list the property th : Additional Page as necessary. On the to	or supplying correct information.
ts the exemp	—may be unlimited in doll tion to a particular dollar a to the applicable statutory	amount and the value of the	uil fair market value of the property bei for health aids, rights to receive certain u claim an exemption of 100% of fair n he property is determined to exceed tha	narket value under a law that at amount, your exemption
Which set of	exemptions are you claim	ning? Check one only, even	if your spouse is filing with you.	
Which set of You are of You are of You are of	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule Author of the property and line	ning? Check one only, even inbankruptcy exemptions. 1 11 U.S.C. § 522(b)(2)	1 U.S.C. § 522(b)(3) npt, fill in the information below.	
Which set of You are of You are of You are of	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule	ning? Check one only, even inbankruptcy exemptions. 1 11 U.S.C. § 522(b)(2) A/B that you claim as exement on Current value of the portion you own	1 U.S.C. § 522(b)(3) npt, fill in the information below. Amount of the exemption you claim	Specific laws that allow exemption
Which set of You are of You are of You are of	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule Author of the property and line	ning? Check one only, even inbankruptcy exemptions. 1 11 U.S.C. § 522(b)(2) 4/B that you claim as exemption of the even control of the even control of the even on the even of the even on the even on the even of the even on the even of the even o	1 U.S.C. § 522(b)(3) npt, fill in the information below.	Specific laws that allow exemption
Which set of You are of You are of You are of For any prop Brief descrip Schedule A/I	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule Author of the property and line	A/B that you claim as exen Current value of the portion you own Copy the value from	1 U.S.C. § 522(b)(3) Inpt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	
Which set of You are of You are of You are of For any prop Brief descript Schedule A/I Brief description: Line from	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule Auto Auto	A/B that you claim as exen con Current value of the portion you own Copy the value from Schedule A/B	1 U.S.C. § 522(b)(3) npt, fill in the information below. Amount of the exemption you claim	Specific laws that allow exemption 735 ILCS 5/12-1001(c)
Which set of You are of You are of You are of For any prop Brief description: Line from Schedule A/B. Brief	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule Auto Auto	A/B that you claim as exen con Current value of the portion you own Copy the value from Schedule A/B \$ 0.00	npt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	735 ILCS 5/12-1001(c)
Which set of You are of You are of You are of You are of For any prop Brief descript Schedule A/B Brief description: Line from Schedule A/B. Brief description: Line from	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule Auto Auto 3.1	A/B that you claim as exen con Current value of the portion you own Copy the value from Schedule A/B	1 U.S.C. § 522(b)(3) Inpt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption. 2 \$ 2,400.00 100% of fair market value, up to	
Which set of You are of Your	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule Auto Auto 3.1	A/B that you claim as exen con Current value of the portion you own Copy the value from Schedule A/B \$ 0.00	npt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	735 ILCS 5/12-1001(b)
Which set of You are of Your	exemptions are you claim laiming state and federal no laiming federal exemptions. erty you list on Schedule A tion of the property and line 3 that lists this property Auto 3.1 Furnishing 6	aing? Check one only, even inbankruptcy exemptions. 1 11 U.S.C. § 522(b)(2) A/B that you claim as exemption as exemption as exemption you own Copy the value from Schedule A/B \$ 0.00	npt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption. ✓ \$ 2,400.00 ☐ 100% of fair market value, up to any applicable statutory limit ✓ \$ 1,500.00 ☐ 100% of fair market value, up to	735 ILCS 5/12-1001(c)

☐ Yes

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Debtor 1

N	/lon	a

Davis

Case number (if known)_

Part 2: Additional Page

on Schedule	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description:	Clothings	\$1,000.00	⊿ s 1,000.00	735 ILCS 5/12-1001(a)	
Line from Schedule A/B:	11		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	Deposit Of Money	\$0.00		735 ILCS 5/12-1001(b)	
Line from Schedule A/B:	<u>17.1</u>		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	 \$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description: Line from		\$	☐ \$ 100% of fair market value, up to		
Schedule A/B: Brief		\$	any applicable statutory limit		
description: Line from Schedule A/B:		Φ	□ \$ □ 100% of fair market value, up to any applicable statutory limit		
Brief description: Line from Schedule A/B;		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit		
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit		
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	\$ \$00% of fair market value, up to any applicable statutory limit		
Brief description: - Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit		
Brief description: -			□ \$ 100% of fair market value, up to		
Schedule A/B: - Brief description: - Line from Schedule A/B: -			any applicable statutory limit \$ 100% of fair market value, up to any applicable statutory limit		

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Fill in this	information to identify you	r case:					
Debtor 1	Mona		Davis				
Debtor 2		Middle Name	Last Nam	9			
(Spouse, if filing	•	diddle Name	Last Name	3			
Case number	Bankruptcy Court for the: Norti	nern Distric	t of Illinois				
(If known)						☐ Check	k if this is an
		****					ded filing
Official	Form 106D						
Sched	lule D: Credit	ors W	ho Have	Claime Seem			
Be as comp	lete and accurate on negati	51- 16-	Have	Ciairiis Secur	ea by Pro	perty	12/15
information	lete and accurate as possi . If more space is needed, o ages, write your name and	Die. It two I Copy the A	married people ar dditional Page, fil	e filing together, both are e i it out, number the entries	equally responsible	for supplying corre	ct
auditional p	ages, write your name and	case numi	ber (if known).		and decomplete the	s form. On the top o	ot any
1. Do any cr	editors have claims secure	d by your	property?				
■ No. Cł	neck this box and submit this	form to the	court with your oth	er schedules. You have noth	ning else to report on	this form	
₩ Yes. F	ill in all of the information bel	ow.			,		
Part 1: Li	st All Secured Claims						
					0-1		
2. List all sec	cured claims. If a creditor ha	is more that	n one secured clain	n, list the creditor separately	Column A Amount of claim	Column B Value of collateral	Column C
As much a	s possible, list the claims in a	n nas a par ∄phabetical	ucular claim, list the order according to	e other creditors in Part 2. the creditor's name	Do not deduct the	that supports this	Unsecured portion
2.1					value of collateral.	claim	If any
Creditor's Nar	der Consumer USA	— Descri	be the property tha	it secures the claim:	\$11,924.00	\$11,924.00	\$0.00
	X 961245	Auto:	2012 Nissan A	ltima			
Number	Street	——] 					
***************************************		As of t	he date you file, the	e claim is: Check all that apply.			
Fort Wo	rth TX 76161		ntingent iquidated				
City	State ZIP Code	— Dis					
Who owes th	e debt? Check one.		of lien. Check all tha	t anniv			
Debtor 1 o		_		(such as mortgage or secured			
Debtor 2 o		car	loan)				
Debtor 1 a	nd Debtor 2 only	☐ Stat	utory lien (such as tax	(lien, mechanic's tien)			
	e of the debtors and another	U Judi	gment lien from a law	suit			
☐ Check if t	his claim relates to a	→ Oth	er (including a right to	offset)			
communi	o incurred 02/10/2015	l and d .		. 2 0 4 4			
2.2	Samun propriessande en espesie à recur est acquires des landas des landas des constitues faut à ces dans	to a secure of a Carlotte in the carbon of the Pro-	figits of account nu	Profession emperature consideration and the consideration of the consideration of the constant	agen in the energy construction regard, where they consider	Transmitter in the son one state when the same services and the	12 - TO 42 - 1400 V. Marka A 1000 TO 1400 TO 1
Creditor's Name		Describ	e the property that	secures the claim:	s0.00	s	0.00
	•			A land and the second s			
Number	Street		THE STREET, SALVAGE SALVAGE SALVAGE STREET, SALVAGE SA				!
		As of th	e date you file, the	claim is: Check all that apply.			
		Cont					}
City	State ZIP Code	_ 🔲 Unliq Dispu					
Who owes the	debt? Check one.	-					
Debtor 1 oni			of lien. Check all that				:
Debtor 2 oni		car lo	greement you made (s ean)	such as mortgage or secured			
	d Debtor 2 only	Statu	tory lien (such as tax	ien, mechanic's lien)			ĺ
	of the debtors and another		ment lien from a laws				:
	is claim relates to a	Other	(including a right to o	ffset)			1
community Date debt was		1 * **					:
AND THE PROPERTY OF THE PROPER	CONTROL SANCTOR CONTROL OF THE CONTROL OF CONTROL OF THE CONTROL O	Last 4 di	gits of account nur	nber	- saladan - salada salada salada eta esalada eta esalada eta esalada eta esalada eta esalada eta esalada eta e	and the second of the second o	de company of the company
And the tion	lar value of your entries in	Column A	on this page. Writ	e that number here:	11,924.00		

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	Document P	age 23 of 54		
Fill in this information to identify your car	se:			
Mono				
Debtor 1 WiOnd L. First Name Middle	Davis			
Debtor 2	Name Last Name			
(Spouse, if filing) First Name Middle	Jame Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number			<u></u>	
(If known)				neck if this is an
			an	nended filing
Official Form 106E/F				
Schodulo E/E- Condition	1801			
Schedule E/F: Credito	rs Who Have U	nsecured Clair	ns	12/15
Be as complete and accurate as possible. Use the other party to any executory contra A/B: Property (Official Form 106A/B) and or creditors with partially secured claims that needed, copy the Part you need, fill it out, nany additional pages, write your name and contract the contract of	Schedule G: Executory Contract listed in Schedule D: Cred	racts and Unexpired Leases	ist executory contracts on (Official Form 106G). Do no	Schedule ot include any
any additional pages, write your name and o	ase number (if known).			. On the top of
Part 1: List All of Your PRIORITY Un	secured Claims			
Do any creditors have priority unsecured				
No. Go to Part 2.	i ciaims against you?			
Yes.				
2. List all of your priority unsecured claims	If a creditor has more than and			
 List all of your priority unsecured claims each claim listed, identify what type of claim nonpriority amounts. As much as possible. 	it is. If a claim has both priority	priority unsecured claim, list to and nonpriority amounts. Jiet the	he creditor separately for ea	ch claim. For
nonpriority amounts. As much as possible, unsecured claims, fill out the Continuation F	ist the claims in alphabetical ord	er according to the creditor's n	ame. If you have more than	two priority
	ege or rait is it more than one i	ureulur noios a namiciliar clain	n, list the other creditors in P	art 3.
(For an explanation of each type of claim, s	se the instructions for this form it	n the instruction booklet.)	SWAROWAN ARAMANANAN ARAMANAN ARAMANAN ARAMAN AR	
			Total claim Priority	Nonpriority
2.1			amount	amount
Priority Creditor's Name	Last 4 digits of accoun	nt number	\$\$	\$
	When was the debt inc	urred?		
Number Street				
	As of the date you file,	the claim is: Check all that apply		
City State ZIP Cor	D casting			
Who incurred the debt? Check one.	Unliquidated			
Debtor 1 only	Disputed			
Debtor 2 only	Type of PRIORITY un:	nonred dele-		
Debtor 1 and Debtor 2 only				
At least one of the debtors and another	Domestic support obli			
☐ Check if this claim is for a community of	lebt Claims for doubt	er debts you owe the government		
Is the claim subject to offset?	intoxicated	rsonal injury while you were		
□ No	Other. Specify			
.2	and the second s	en e	-parameter and the symposition and a medical popularies with the parameter of the forest consistency of the forest production of the forest produc	and in supplication of the
Priority Creditor's Name	Last 4 digits of account	number	\$\$	\$
Number Street	When was the debt incu	ırred?		
Judet Surger	As of the date you file.	the claim is: Check all that apply.		
	Contingent	and the control of the control of the capping.		
City State ZIP Code				
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of BDIADITY	en accorded a la ferre		11111-7
Debtor 2 only	Type of PRIORITY uns Domestic support oblig			-
Debtor 1 and Debtor 2 only		rations r debts you owe the government		111100
At least one of the debtors and another		constraint white		
Check if this claim is for a community d	intoxicated	sonal injury while you were		
Is the claim subject to offset?	Other. Specify			
□ No □ Yes		and the state of t		

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Debto	r	1

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	First Name Middle Name	Last Name	Case number (if known)
Part 2:	List All of Your NON!	PRIORITY Unsecured Claims	

de de	List All of Your NONPRIORITY	Unsecured	Claims		
3.	Do any creditors have nonpriority unsecu	red claime and	inet vau?		
	No. You have nothing to report in this par	t. Submit this fo	orm to the court with your other schedules		
	Yes		services direct schedules.		
4.	List all of your nonpriority unsecured claim nonpriority unsecured claim, list the creditor s included in Part 1. If more than one creditor h claims fill out the Continuation Page of Part 2	olds a narticula	betical order of the creditor who holds each claim. If a creditor has ach claim. For each claim listed, identify what type of claim it is. Do not relaim, list the other creditors in Part 3. If you have more than three no	s more list cl nprior	e than one aims aiready ity unsecured
	1			SSECTION A	ial claim
.1	First Premier Bank		2 2 4 4	10	iai ciaim
	Nonpriority Creditor's Name		Last 4 digits of account number 2 0 4 4	¢	294.00
	3820 N Louise Ave		When was the debt incurred? 08/13/2015	Ψ	
	Sioux Falls SD	F7407			
	City State	57107 ZIP Code	As of the date you file, the claim is: Check all that apply.		
			☐ Contingent		1
	Who incurred the debt? Check one.	-	Unliquidated		
	Debtor 1 only		Disputed		1
	Debtor 2 only				
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		İ
	At least one of the debtors and another		☐ Student loans		
	☐ Check if this claim is for a community de	bt	Obligations arising out of a separation agreement or divorce		
	is the claim subject to offset?		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	☑ No		Other. Specify Credit Card		į
	☐ Yes				1
2	FedLoan Servicing	and the second of the second s		************	on and the second s
	Nonpriority Creditor's Name		Last 4 digits of account number $\frac{2}{01/06/2016}$ When was the debt incurred? $\frac{2044}{01/06/2016}$	\$	13,657.00
	P O BOX 60610 Number Street		when was the debt incurred?		
	Harrisburg PA	17106	As of the date you file, the claim is: Check all that apply.		
	City State	ZIP Code	☐ Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only				
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		Student loans		
	Check if this claim is for a community deb	ot .	Obligations arising out of a separation agreement or divorce		The second second second
	Is the claim subject to offset?		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	☑ No		Other. Specify		
	Yes				1
1	Wells Fargo Dealers Svcs	graphicoccustici espelablika sent tizidi revizione espelablika selektrik		Notes de la constante	consequency (displaces or accessively states (a sequence conse
	Nonpriority Creditor's Name		Last 4 digits of account number 2 0 4 4	;	12,919.00
	P O BOX 1697		When was the debt incurred? 03/03/2008		
	Number Street		Marriagen State Co.		
	Winterville NC		As of the date you file, the claim is: Check all that apply.		Ī
	5,000	ZIP Code	· · · · · · · · · · · · · · · · · · ·		
	Who incurred the debt? Check one.		Contingent		
	Debtor 1 only		☐ Unliquidated ☐ Disputed		
	Debtor 2 only		₩ Disputed		White of on
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		Student loans		
	\square Check if this claim is for a community debi	:	Obligations arising out of a separation agreement or divorce		
	ls the claim subject to offset?		that you did not report as priority claims		-
	☑ No		Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes		Other. Specify Automobile		
	The first state of the state of				

Debtor 1

First Name

Case number (if known)_

rt 2:	Your NONPRIORITY	Unsecured	Claims — Continuation P	age

.4		a vananig v	with 4.4, followed by 4.5, and so forth.	Total cl
Comenity Bank Nonpriority Creditor's Nan	/Dressbrn		Last 4 digits of account number 2 0 4 4	2005455555555555555
P O BOX 18278				s <u> </u>
Number Street	99		When was the debt incurred? 05/31/2016	
Columbus	ОН	43218	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the de	bt? Check one		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			*	
Debtor 1 and Debto	r 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the o			Student loans	
Check if this clair	n is for a community deb	f	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject t		•	Debts to pension or profit-sharing plane, and att	
☑ No			Other. Specify Charge Account	
☐ Yes		•		
And applicable the complete, compressed and construction of construction decreases and construction of the	adejent mesenpliktyrjonen ejelektiliste Heriologische deutsche Heriologische Schrieben Heriologische Ausgesche Bedreit mesenpliktyrjonen ejelektiliste Heriologische deutsche Heriologische Schrieben Heriologische Ausgesch			
Comenity Bank/V	'ctrssec		Last 4 digits of account number 2 0 4 4	s 232.
P O BOX 182789			When was the debt incurred? 06/02/2016	\$232.
Number Street Columbus	011			
City	OH State	43218	As of the date you file, the claim is: Check all that apply.	
M/h = to		ZIP Code	Contingent	
Who incurred the debt	? Check one.		Unliquidated	
Debtor 1 only			Disputed	
Debtor 2 only Debtor 1 and Debtor 2	l e el		Type of NONPRIORITY unsecured claim:	
At least one of the det	only		Student loans	
			Obligations arising put of a separation	
	is for a community debt		you did not report as priority claims	
Is the claim subject to	offset?		Debts to pension or profit-sharing plans, and other similar debts	
☑ No □ Yes			Other. Specify Charge Account	
		ACCIPITATION AND THE PROPERTY OF THE PROPERTY		
Credit One Bank			Last 4 digits of account number 2 0 4 4	s 279.00
Nonpriority Creditor's Name			_	7
P O BOX 98872 Number Street	-		When was the debt incurred? 10/27/2016	
Las Vegas	NV	89193	As of the date you file, the claim is: Check all that apply.	
	State	ZIP Code	☐ Contingent	
Who incurred the debt?	Check one.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 o			Type of NONPRIORITY unsecured claim:	
At least one of the debto	nly		Student loans	
Check if this claim is			you did not report as priority claims	
the claim subject to of	fset?		Debts to pension or profit-sharing plans, and other picture date.	
I No			Other, Specify Credit Card	
J Yes				1

Debtor 1

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Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

	er listing any entries on this page, number t	hem beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
1.7	Syncb/Wal-Mart		Last 4 digits of account number 2 0 4 4	roo o
	Nonpriority Creditor's Name P O BOX 965024		When was the debt incurred? 11/27/2016	\$ 500.0
	Number Street El Paso TX	79998	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community deb is the claim subject to offset? ☑ No ☐ Yes	ı	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other, Specify Charge Account 	
.8	Comenity Bank/Meijer Inc	h Mariana (Manuful Manuful Manuful Architechte Manuful	Last 4 digits of account number 2 0 4 4	\$ 458.00
	Nonpriority Creditor's Name P O BOX 182789		When was the debt incurred? 05/02/2016	\$438.00
	Number Street Columbus OH	43218	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one. ☑ Debtor 1 only		☐ Unfliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
į	is the claim subject to offset? No Yes		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account	
9	useetstevorumin – monuments statisti heiden oli osabetelli oura suurvus-tuuja nepatiini tärittänkoon munaavatta elejää yrvusee soomun vaamuinen kale	op-do, etai 1889 imililik propriitiis kordinin eto kor, sepandropia enos s siministration.		s 227.00
,	Comenity Bank/Carson's		Last 4 digits of account number 2 0 4 4 When was the debt incurred? 06/06/2016	·
Ĩ	P O BOX 182789 Jumber Street		WANTA AND AND AND AND AND AND AND AND AND AN	
_	Columbus OH State	43218 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	zn code	☐ Contingent☐ Unliquidated☐ Disputed	
	☑ Debtor 1 only ☑ Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
l:	s the claim subject to offset? No Yes		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Account	

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Case number (if known)_

	page, number i	them beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim
.1] Comenity Bank/Ashstv	vrt		Last 4 digits of account number 2 0 4 4	s 272.00
P O BOX 182789			When was the debt incurred? 05/31/2016	\$
Number Street Columbus City	OH State	43218	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Cher		ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this claim is for ls the claim subject to offset Mo Yes	a community det	ot	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Account	
2 Acl Laboratories	California de Samuelandos (Aprilios Francisco de Armeian de Samuelandos (Aprilios Armeiandos (Aprilios Armeiando) (Aprilios Armeiandos (Aprilios Armeiandos (Aprilios Armeiando) (Aprilios Armeiandos (Aprilios Armeiandos (Aprilios Armeiando) (Aprilios Armeiandos (Aprilios Armeiandos (Aprilios Armeiandos	and deficiency of the facilities of the interpretation of the object of the deficiency of the confidence of the	Last 4 digits of account number $\frac{2}{2}$ $\frac{0}{4}$ $\frac{4}{4}$	s 100.00
Nonpriority Creditor's Name 10522 South Cicero Av	e 1st Floor		When was the debt incurred? 02/28/2014	\$ <u>100.00</u>
Number Street Oak Lawn City	IL	60453	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check ☐ Debtor 1 only ☐ Debtor 2 only	State k one.	ZIP Code	Contingent Unliquidated Disputed	
Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a		ı	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset? ✓ No ☐ Yes	· ·		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
Consumer Cellular	hemory Australian each foreign for the Australian Continues to an Australian Australia	- And Andrew Annual State (Sept. Sept. Annual Sept. Se	Last 4 digits of account number 2 0 4 4	§ 1,110.00
12447 SW 69th Ave			When was the debt incurred? 08/12/2015	
Number Street Portland City	OR State	97223 ZIP Code	As of the date you file, the claim is: Check all that apply.	111111111111111111111111111111111111111
Who incurred the debt? Check		Zir Code	Contingent Unliquidated	
Debtor 1 only Debtor 2 only	Circ.		Disputed	Alt tolk community
Debtor 1 and Debtor 2 only At least one of the debtors and	another		Type of NONPRIORITY unsecured claim: Student loans	A A A A A A A A A A A A A A A A A A A
Check if this claim is for a			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	To the commencer
Is the claim subject to offset? No Yes			Other. Specify Cellular	

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Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Comcast			Last 4 digits of account number	2 0 4 4	g.	60
Nonpriority Creditor's Name	······································			01/01/2017	Φ	
P O BOX 3002			When was the debt incurred?			
Number Street Southeastern	PA	60602	As of the date you file, the claim	is: Check all that apply.		
City	State	ZIP Code	Contingent			
Who incurred the debt? Check one.			Unliquidated			
Debtor 1 only			☐ Disputed			
Debtor 2 only			Type of NONPRIORITY unsecur	red claim:		
Debtor 1 and Debtor 2 only			☐ Student loans			
☐ At least one of the debtors and another			Obligations arising out of a separations	ration agreement or divorce that		
Check if this claim is for a commu	nity debt		you did not report as priority clair	ns		
Is the claim subject to offset?			Debts to pension or profit-sharing Other. Specify Cable	g plans, and other similar debts		
Mo			Otner. Specify Cable			
⊒ Yes						
christ Hoorital	DOCUMENTO CONTRACTOR C	kthylishelindalumiyaqqlariliyddi voolfum, uhdish iisillar, so-quuqqdaqquu, q	Last 4 digits of account number	raidatinfookaantakkirilankkirilankkirilankkirilankkirilankkirilankkirilankirila	•	200
Christ Hospital Nonpriority Creditor's Name			AAANI		a	
4440 W 95th Street			When was the debt incurred?	01/01/2016		
lumber Street		60452	As of the date you file, the claim	is: Check all that apply.		
Dak Lawn Dity	State	60453 ZIP Code	Contingent	,,,		
	*********	2000	Unliquidated			
Who incurred the debt? Check one.			Disputed			
Debtor 1 only			·			
Debtor 2 only			Type of NONPRIORITY unsecure	ed claim:		
Debtor 1 and Debtor 2 only			☐ Student loans			
At least one of the debtors and another			Obligations arising out of a separ	ation agreement or divorce that		
Check if this claim is for a commu	nity debt		you did not report as priority clain Debts to pension or profit-sharing			
s the claim subject to offset?			Other, Specify Medical	pians, and other similar debts		
■ No						
Yes						
Γ-Mobile Bankruptcy Team	ikaninki kalenda eran nim pamalinki.	KARIBARINEN ERIKATURA BARIBARI ERIKATURA BARIBARI ERIKATURA BARIBARI ERIKATURA BARIBARI ERIKATURA BARIBARI ERI	Last 4 digits of account number	2 0 4 4	\$	800
Vonpriority Creditor's Name			-			
P O BOX 53410			When was the debt incurred?	01/01/2017		
umber Street Bellevue	WA	60453	As of the date you file, the claim	is: Check all that apply.		
Sity	State	ZIP Code	Contingent			
•			Unliquidated			
Who incurred the debt? Check one.			Disputed			
Debtor 1 only						
Debtor 2 only			Type of NONPRIORITY unsecure	ed claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans			
Check if this claim is for a commun	nity debt		Obligations arising out of a separa you did not report as priority claim	15		
s the claim subject to offset?			Debts to pension or profit-sharing	plans, and other similar debts		
Z No			Other. Specify Cellular			
☑ No ☑ Yes						

Debtor 1

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Your NONPRIORITY Unsecured Claims — Continuation Page

The risting any enti	ਾਵਨ ਦਸ ਸ਼ਸ਼ਾਂਤ page, number t	nem beginning w	ith 4.4, followed by 4.5, and so forth.	Total claim
Chex System		*****	Last 4 digits of account number 2 0 4 4	s 0.0
Nonpriority Creditor's I 7805 Hudson Number Street	Rd		When was the debt incurred? 12/01/2016	\$0.0
Woodberry	MN	55125	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the	debt? Check one.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and De	btor 2 only ne debtors and another		☐ Student loans	
	ne deptors and another faim is for a community debi	t.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
is the claim subje	ct to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Notice Only	
⊠ No □ Yes			a one specify Notice Office	
PROCESSOR AND THE PROPERTY SHE COME TO A PROCESSOR AND THE SHE COME TO A PROCESSOR OF THE SHE COME TO THE SHE COME TO THE SHE COME TO THE SHE COME TO THE T	ingstrament til skall skall skall state state skall skal	inde en ermets (filmfahr) vilkelings verskerset, en eine en ei	Benefity mention and the control of	
Equifax Bankr	uptcy Dept.		Last 4 digits of account number 2 0 4 4	\$ 0.00
Nonpriority Creditor's Na P.O. Box 7402			When was the debt incurred? 12/01/2016	
Number Street	4		- The was the dept medited? 120 1720 10	
Atlanta	GA	30374	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the	debt? Check one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Deb	tor 2 only e debtors and another		☐ Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	nim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subjec ✓ No ☐ Yes	t to offset?		Other, Specify Notice Only	
terreggi etglandilish qarili misandi a shiradi akkungisi ee ung meyal bersiin dabada isad	ન વર્ષા જન્મ કરિયા આ કે માર્થિક લેવાન્ય કરો છે. સામજી વર્ષા કરિયા કરિયા કરે કરતા કરે છે. આ કોઈ પ્રસાણ કરે કરી ત્રાંત્ર કરિયા અને કે માર્થિક લેવાન્ય કરો કરી કરિયા કરિય	a - Magazan ga tagatamatak katantak katantak atau an manak masak manak anam	Melvers des ferritors productions and the sections are interested as the section of the section	s 0.00
Experian Bankı Nonpriority Creditor's Nan	ruptcy Dept.		Last 4 digits of account number 2 0 4 4	\$0.00
P.O. Box 2002 Number Street	ie		When was the debt incurred? 12/01/2016	
Allen	TX	75013	As of the date you file, the claim is: Check all that apply.	;
City	State	ZIP Code	☐ Contingent	:
Who incurred the de	ebt? Check one		Unliquidated	
Debtor 1 only			☐ Disputed	:
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debt			☐ Student loans	:
	debtors and another		Obligations arising out of a separation agreement or divorce that	:
Check if this claim	m is for a community debt		you did not report as priority claims	
ls the claim subject No □ Yes	to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other, Specify Notice Only	

Debtor 1

Mona

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Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

5- <u>1</u>	er listing any entries on this page, number them	beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
6.1	Trans Union Bankruptcy Dept.		Last 4 digits of account number 2 0 4 4	s0.00
	Nonpriority Creditor's Name P O BOX 1000		When was the debt incurred? 12/01/2016	
	Number Street Chester PA	19022	As of the date you file, the claim is: Check all that apply.	
	City Slate	ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims	
	Is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other, Specify Notice Only	
	No No Yes		Citic. openly Cond Only	
5.2		middheildhe saadheildhe landaridh ean da in geann d	Last 4 digits of account number 2 0 4 4	S 0.00
	Certegy Check Service Nonpriority Creditor's Name		······································	\$0.00
	P.O. Box 30046 Number Street		When was the debt incurred? 12/01/2016	
	Tampa FL	33630	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	☑ Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		$f \Box$ Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt		you did not report as priority claims	
	Is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify_Notice Only	
	☑ No Yes			
.3	City Of Chicago Dept. Of Finance	tala daga ke daga kedang pidangan magunan yang organ agangan	Last 4 digits of account number 2 0 4 4	s100.00
	Nonpriority Creditor's Name		04/04/0047	
	P O BOX 4641 Number Street		When was the debt incurred? 01/01/2017	
	Chicago IL	60680	As of the date you file, the claim is: Check all that apply.	
	City Slate 2	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated☐ Disputed	
	Debtor 1 only			
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other, Specify <u>Tickets</u> , <u>Fines & Fees</u>	
	☑ No		•	
	☐ Yes			

Debtor 1

Mona	
First Name	Middle

Document

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,	
1.1	Σ.И

List Others to Be Notified About a Debt That You Already Listed

State collection service			On which entry in Part 1 or Part 2 did you list the original creditor?
P O BOX 6250			Line 5.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Madison	WI	53701	Last 4 digits of account number 2 0 4 4
City	State	ZIP Code	
Professional Credit Service	e	Languagi salasi a i sydoriosi toombooti subaq malai be	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
2892 Crescent Ave	····		Line 5.3 of (Check one): \square Part 1: Creditors with Priority Unsecured Claims
On Oct			Part 2: Creditors with Nonpriority Unsecured Claims
Eugene City	OR State	97408 ZIP Code	Last 4 digits of account number 2 0 4 4
vaane	ni deliberi one sen implessoon populari	a someone de particular de la particular de la particular de la composition della co	On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Dity	State	ZIP Code	Last 4 digits of account number
Name	33 757 138 754 13 754 13 754 13 754		On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Claims
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Sity	State	ZIP Code	Last 4 digits of account number
ane	OR CONTROL OF STREET, THE STRE	A LEGICIAN PROPOSATO A PROSESSA CONSTRUCTOR CONTRACTOR	On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street		THE PARTY AND TH	Part 2: Creditors with Nonpriority Unsecured
		· · · · · · · · · · · · · · · · · · ·	
The second secon	State	ZIP Code	Last 4 digits of account number
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
umber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
CHEPA.			Part 2: Creditors with Nonpriority Unsecured Claims
ity	State	ZIP Code	Last 4 digits of account number
ny	-1010	- COOC	

Decyment

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Debtor 1

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government		\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	13,657.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	17,626.00
	6j. Total. Add lines 6f through 6i.	6j.	\$	31,283.00

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Debtor Debtor 2		entify your case:	Action of the state of Caree	Will be the Control of the Control o	
Dobtor 2	Mona First Name	L. Middle Name	Davis Last Name		
(Spouse If filing)	First Name	Middle Name			
		r the: Northern Distric	Last Name		
Case number		rule. Northern Distric	t of illinois		
(If known)	****		····	☐ Check if thi	e ic i
				amended fil	
)fficial F	orm 106G	.			
	·				
	ile G; EX	ecutory C	ontracts a	and Unexpired Leases 12/	15
List separa example, re unexpired to	ately each person ent, vehicle leas eases.	n or some	whom you have the the instructions for th	schedules. You have nothing else to report on this form. ses are listed on <i>Schedule A/B: Property</i> (Official Form 106A/B). contract or lease. Then state what each contract or lease is for (for sis form in the instruction booklet for more examples of executory contracts	and
	, ,	nom you have the c	ontract or lease	State what the contract or lease is for	
Name					
Number	Street				
City	wasanin a masan a sagara y	State ZIP Code			
N.				the first of the second of	
Name				APPRINGING.	
Number .	Street				
City		State ZIP Code			
	Select Subsection and trips in property on the impact of the selection of	Zir Coue	transfer to drawn gasser the mission of the last	and the state of the state of the state of the state of a state of the	y 25 -
Name			V	MANAGEMENT AND ADMINISTRATION OF THE PROPERTY	
Number S	Street				
	epoperation of the second section of the second	State ZIP Code	· Salar and a second and a second		
City					
City				Automation.	
City	ireet			Manage to the state of the stat	
City Name Number S	itreet	State 7/D A			
City Name	itreet	State ZIP Code			
City Name Number S City	itreet	State ZIP Code			
City Name Number S	itreet	State ZIP Code			

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Debtor 1	information to iden Mona	1		
Deptor 1	First Name		Davis Last Name	
Debtor 2 (Spouse, if filir	ng) First Name	I de la companya de l		
		Middle Name	Last Name	
	s Bankruptcy Court for the	ie: Northern District (of Illinois	
Case numbe (If known)	er			
				☐ Check if this is
)fficial	Form 106H			amended filing
	ule H: You			12/15
debtors a filing tog d number se number	re people or entities gether, both are equa the entries in the bo r (if known). Answer	who are also liable illy responsible for xes on the left. Atta every question.	of for any debts you may have supplying correct informati ach the Additional Page to tl	e. Be as complete and accurate as possible. If two married pec on. If more space is needed, copy the Additional Page, fill it ou his page. On the top of any Additional Pages, write your name
☑ No	any codobiois;	(ii you are ming a jo	pint case, do not list either spo	ruse as a codebtor.)
Yes				
Within th	he last 8 years, have	you lived in a comr	munity property state or teri	ritory? (Community property states and territories include
		isiana, Nevada, New	/ Mexico, Puerto Rico, Texas,	ritory? (Community property states and territories include Washington, and Wisconsin.)
WELL INO. G	50 to line 3,			
Yes. L	Did your spouse, form	er spouse, or legal e	equivalent live with you at the	time?
-	es. In which communit	ly state or territory di	id you live?	. Fill in the name and current address of that person.
Na	ame of your spouse, former s	pouse, or legal equivalent		
				
NL	umber Street			
Cit	ly	Claric		
		State	ZIP Code	
Schedule	in, list all of your colline 2 again as a cod D (Official Form 106 E/F, or Schedule G t	D), Schedule E/F (C	Official Form 106E/E) or Cost	btor if your spouse is filing with you. List the person igner. Make sure you have listed the creditor on ledule G (Official Form 106G). Use Schedule D,
scrieuuie .	: Your codebtor			Column 2: The creditor to whom you owe the debt
				y == 0 till dobt
				Check all schedules that apply:
Column 1				
				Schedule D, line
Column 1	Street			Schedule D, line Schedule E/F, line
Name	Street	Chate		Schedule D, line
Column 1	Street	State	ZIP Code	Schedule D, line Schedule E/F, line
Name	Street	State	ZIP Code	Schedule D, line Schedule E/F, line Schedule G, line
Name Number City		State	ZIP Code	Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Name Number City	Street	State	ZIP Code	Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line
Name Number City				Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Name Number City Name		State State	ZIP Code	Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line
Name Number City Name				Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line
Name Number City Name Number City				Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line

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Fill in this	information to identify	y your case:					
Debtor 1	Mona		ivis				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing		Middle Name	Last Name	***************************************			
United States	Bankruptcy Court for the:	: Northern District of Illino	is				
Case number (If known)	***************************************		_			if this is:	
<u> </u>						amended filing	-h
065-:-15	1001				inco	upplement showing postpetition or ome as of the following date:	chapter 13
Official F					ММ	/ DD / YYYY	
Sched	dule I: You	ur Income					12/15
If you are se	prrect information. If y parated and your spo	ou are married and not use is not filing with yo to top of any additional p	filing jointly, and y u. do not include i	your spouse is information ab	i living with	btor 2), both are equally responsit h you, include information about y pouse. If more space is needed, at f known). Answer every question.	our spouse.
	ır employment		.				
information			Debtor 1	The Section Comments of the Se	-El-Mo Istorika anniversito i kiesaanassa suogi	Debtor 2 or non-filing spou	Se ************************************
attach a s	e more than one job, eparate page with n about additional s.	Employment status	☑ Employed			☐ Employed ☐ Not employed	
Include pa	irt-time, seasonal, or					, ,	
Occupatio	n may include student aker, if it applies.	Occupation	Room Atten	ndant	ethin		
		Employer's name	Blackstone				
		Employer's address	636 S Michi	gan Ave			
			Number Stree	t		Number Street	The state of the s
			Chicago City	IL State ZIP	60605 Code	City State ZIF	² Code
		How long employed th	ere? 9yrs	_ .		9yrs	,
Part 2:	Give Details About	Monthly Income					
spouse unli If you or yo	ess you are separated. ur non-filing spouse ha	ive more than one emplo	yer, combine the inf			write \$0 in the space. Include your not	on-filing
below. If yo	ou need more space, at	tach a separate sheet to	tnis torm.	For	Debtor 1	For Debtor 2 or non-filing spouse	:
		ary, and commissions (to calculate what the month		2. <u>\$_2</u>	,308.00	superconjugation and an additional and a state community of the state	
3. Estimate	and list monthly over	time pay.		3. +\$	0.00	+ \$:
4. Calculate	gross income. Add lin	ne 2 + line 3.		4. \$_2	308.00	\$:

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Copy line 4 here	Debtor 1 Mona L. Davis First Name Middle Name Last Name		С	ase number (if hi	nown)	
Solution to the contributions for retirement plans 5a. Tax, Medicaro, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Sa. Sa. Medicaro, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Sa. Sa. Sa. Sa. Sa. Sa. Sa. Sa. Sa. Sa			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
59. Tax, Medicare, and Social Security deductions 50. Mandatory contributions for retirement plans 50. Voluntary contributions for retirement plans 50. S.	Copy line 4 here	→ 4	\$_	2,308.00	·-	sa.
5. Mandatory contributions for retirement plans 5. Voluntary contributions for retirement plans 5. Voluntary contributions for retirement plans 5. Required repayments of retirement fund loans 5. Required repayments of retirement fund loans 5. Domestic support obligations 5. Domestic su	5. List all payroll deductions:			· · · · · · · · · · · · · · · · · · ·		•
5. Mandatory contributions for retirement plans 5. Voluntary contributions for retirement plans 5. Voluntary contributions for retirement plans 5. Required repayments of retirement fund loans 5. Required repayments of retirement fund loans 5. Domestic support obligations 5. Domestic su	5a. Tax, Medicare, and Social Security deductions	5.0	r	400.00		
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. S. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			·	499.00		
56. Required repayments of retirement fund loans 56. Insurance 59. Union dues 59. S 53.00 \$ 50. Other deductions. Add lines 59 + 56 + 56 + 56 + 56 + 56 + 56 + 56 +			*			
see, Insurance 56. Insurance 57. Domestic support obligations 58. Union dues 59. Union dues 50. Sa89.00 \$0. Sa89.00			·			
59. Domestic support obligations 59. Union dues 59. Union dues 59. Union dues 59. S 53.00 \$ 59. S 53.00 \$ 50. Other deductions. Specify: PreTaxTransit, Short Trm, SuppAd 50. Add the payroil deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$ 59. S 689.00 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 \$ 1,419.00 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 \$ 1,419.00 \$ 8. List all other income regularly received: 8. Net income from rental proporty and from operating a business, profession, or farm 4 Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and fine total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and properly settlement. 8c. \$ 356.00 \$ 8c. Social Security 8c. \$ 356.00 \$ 8c. \$ 0.00 \$ 8c.	5e. Insurance		*	219.00		
59. Union dues 59. Union dues 59. Other deductions. Specify: PreTaxTransit, Short Trm, SuppAd 50. 1 + \$ 118.00	5f. Domestic support obligations	5f.	\$			
5. Other deductions. Specify: PreTaxTransit, Short Trm, SuppAd 5. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5n. 6. \$889.00 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,419.00 \$ 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Altach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include aimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$ 8f. Other government assistance that you regularly receive include cash assistance that you require the Supplemental Number Assistance Program) or housing subsidies. 8pectry, n/a 8g. Pension or retirement income 8g. \$0.00 \$ 8g. Pension or retirement income 8g. \$0.00 \$ 8h. Other monthly income. Add lines 8a + 8b + 8c + 8d + 8a + 8f + 8g + 8h. 9 \$3.356.00 \$ 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8a + 8f + 8g + 8h. 9 \$3.356.00 \$ 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your recommates, and other rificiends or relatives. 10 not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household. Your dependents, your recommates, and other rificiends or relatives. 11. \$0.00 \$ 11. \$1.775.00 \$ 12. \$0.00 \$ 13. \$1.775.00 \$ 14. \$0.00 \$ 15. \$1.775.00 \$ 15. \$1.775.00 \$ 16. \$0.00 \$ 17. \$1. \$1. \$1. \$1. \$1. \$1. \$1. \$1. \$1. \$1	5g. Union dues	5a	\$	53.00		
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8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 356.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$					\$	
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce sattlement, and property settlement. 8c. \$ 356.00 \$ \$ 8d. \$ 0.00 \$ 8d. \$ 0	7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,419.00	\$	
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8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 356.00 \$ \$ 86. \$ 0.00 \$ \$ 86	receipts, ordinary and necessary business expenses, and the total	9.5	\$	0.00	s	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 8e. \$ 0.00 \$ 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: n/a 8g. Pension or retirement income 8h. Other monthly income. Specify: n/a 8h. +\$ 0.00 \$ 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$ 356.00 \$ 9. Add all other income. Add line 7 + line 9 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. Calculate monthly income. Add line 7 + line 9 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: n/a 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$ 1.775.00 Combined monthly income.	8b. Interest and dividends		6			
8d. Unemployment compensation 8e. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: n/a 8f. \$ 0.00 \$ 8g. Pension or retirement income 8g. \$ 0.00 \$ 8h. Other monthly income. Specify: n/a 8h. +\$ 0.00 \$ 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$ 356.00 \$ 9. Calculate monthly income. Add line 7 + line 9 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10 \$ 1.775.00 + \$ 0.00 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: n/a 11. + \$ 0.00 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 2. Oombined monthly income	regularly receive	lent	Φ	0.00	5	
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8g. Pension or retirement income 8h. Other monthly income. Specify: n/a 8h. Other monthly income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$\frac{356.00}{\$}\$\$ 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$\frac{356.00}{\$}\$\$ 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 10. \$\frac{1,775.00}{\$}\$\$ 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates. and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: \frac{n/a}{2}\$ 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$\frac{1,775.00}{\$}\$ Combined monthly income	Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce				
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9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$\[\] \[\]	8h. Other monthly income. Specify: n/a	8h. •	+ _{\$}	0.00	+ \$	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. \$\frac{1}{3}\frac{1}{775.00} + \frac{1}{3}\frac{0.00}{3} = \frac{1}{3}\frac{775.00}{3} 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: \frac{n}{a} = \frac{1}{3}		9.	\$		\$	
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: n/a 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 3. Do you expect an increase or decrease within the year after you file this form?	 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 	10.	ş <u> </u>	775.00	\$ 0.00	s 1,775.00
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: n/a 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 3. Do you expect an increase or decrease within the year after you file this form?	 State all other regular contributions to the expenses that you list in Scheen 	∟ Jule J.				
2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 11. + \$ 0.00 11. + \$ 0.00 Combined monthly income	Include contributions from an unmarried partner, members of your household, y friends or relatives.	our dep				
2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$\frac{1,775.00}{\text{Combined monthly income}}\$ 3. Do you expect an increase or decrease within the year after you file this form?	Do not include any amounts already included in lines 2-10 or amounts that are specify: n/a	not ava	lable to	pay expenses		\$ 0.00
3. Do you expect an increase or decrease within the year after you file this form? ✓ No. monthly income	 Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain St 	result is tatistica	the con	nbined monthle	iv innome	\$1,775.00
	 Do you expect an increase or decrease within the year after you file this form. No. 	orm?				
				·····		

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Fill in this information to identi	fy your case:			
Debtor 1 Mona	L. Davis			
First Name Debtor 2	Middle Name Last Name	Check if the	his is:	
(Spouse, if filing) First Name	Middle Name Last Name		ended filing	
United States Bankruptcy Court for the	: Northern District of Illinois	☐ A supr	plement showing pos ses as of the followir	stpetition chapter 13
Case number (If known)			D / YYYY	ig date.
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
(if known). Answer every question		ling together, both are equally r n. On the top of any additional	esponsible for suppl pages, write your nan	uina namat
	usenoid			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	canarata hausahaida			
□ No	saparate nousanoid?			
	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
Do you have dependents?	□ No		Transition of a second supplemental and a second se	eran sawanan sama gerandan ana ana ana ana ana ana
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.		Daughter	_18	☐ No ☑ Yes
		Daughter	15	□ No ☑ Yes
				☐ No
				Yes
				☐ No ☐ Yes
				☐ No
		THE RESERVE THE PARTY OF THE PA		Yes
Do your expenses include expenses of people other than yourself and your dependents?	☑ No ☐ Yes			
art 2: Estimate Your Ongoi	ng Monthly Expenses			
				· · · · · · · · · · · · · · · · · · ·
expenses as of a date after the ban opticable date.	bankruptcy filing date unless you ar kruptcy is filed. If this is a suppleme	e using this form as a supplem ntal Schedule J, check the box	ent in a Chapter 13 ca at the top of the form	ase to report and fill in the
clude expenses paid for with non-	-cash government assistance if you	know the value of		
	it on Schedule I: Your Income (Offic		Your expen	
The rental or home ownership early rent for the ground or lot.	xpenses for your residence. Include f	irst mortgage payments and	\$	0.00
If not included in line 4:				
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or re			4b. \$	0.00
4c. Home maintenance, repair, a			4c. \$	0.00
4d. Homeowner's association or o	condominium dues		4d. \$	0.00

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Debtor 1 Mona L. Davis
First Name Middle Name Lest Name Case number (1/2nown)______

			Your e	(penses
	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
	6. Utilities:	٠.		
	6a. Electricity, heat, natural gas	0		0.00
	6b. Water, sewer, garbage collection	6a	,	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6b.		
	6d. Other. Specify: n/a	6c.	\$	0.00
7	7. Food and housekeeping supplies	6d.	-	
8	Childcare and children's education costs	7.	\$	
9		8.	\$	
10		9.	\$	200.00
11		10.	\$	
12	Transportation. Include gas, maintenance, bus or train fare.	11.	\$	0.00
	Do not include car payments.	12.	\$	100.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	· · · · · · · · · · · · · · · · · · ·		· ····	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify: n/a	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	329.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other, Specify: n/a	17c.	\$	0.00
	17d. Other. Specify: n/a	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify: n/a			
		19,	\$	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20¢.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debto	1 Mona First Name	Middle Name	Davis Last Name	(Case number (if known)		
21. O	t her . Specify: <u>r</u>	n/a			21.	+\$	0.00
22. C a	ilculate your m	nonthly expenses.				g a come a mangement happened and floride come a financiana a	Managha Magain. Na gagas pagan antagaman saman sa man aba inte aba internal sa Saman sa managha Magain sa
22	a. Add lines 4 th	hrough 21.			22a.	\$	1,730.00
22	b. Copy line 22	(monthly expenses for	or Debtor 2), if any, from Offici	al Form 106J-2	22b.	\$	0.00
22	c. Add line 22a	and 22b. The result is	s your monthly expenses.		22c.	\$	1,730.00
							er i vers en
	=	onthly net income.				o.	1,775.00
23a	Copy line 12	(your combined mon	thly income) from Schedule I.		23a.	2	1,770.00
23b	Copy your m	ionthly expenses from	line 22c above.		23b.	\$	1,730.00
23c.	Subtract you	r monthly expenses fi	rom your monthly income.				
	The result is	your monthly net inco	ome.		23c.	\$	45.00
			e in your expenses within th				
			ring for your car loan within the use because of a modification t				
4	No.						
	res. Explair		a Service Communication of the				
	!						
							:
							:

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			Document	Page 40 01 54	
Fill in this i	nformation to i	dentify your case:			
Debtor 1	Mona First Name	L.	Davis		
Debtor 2		Middle Name	Last Name		
(Spouse, if filing		Middle Name	Last Name		
Case number		for the: Northern District	t of Illinois		
(If known)					☐ Check if this is an amended filing
Officia	l Earna 10)CD			
***************************************	I Form 10				
Deci	aration	n About ar	<u>ı İndividu</u> a	al Debtor's Schedules	12/15
If two mari	ied people are	filing together, both a	re equally responsible	for supplying correct information.	
You must t	ile this form wi	henever vou file bankr	untry schedules or an	tondad achadula - ta s	asling property.
•	2	· · · · · · · · · · · · · · · · · · ·	>UVII WIEL A DAILKIIIIIII 1	refided schedules. Making a false statement, conce y case can result in fines up to \$250,000, or impriso	onment for up to 20
, oais, oi s	oui. 10 0.3.0, g	§ 152, 1341, 1519, and	1 3571.		,
	Sign Below				
Did you	pay or agree to	pay someone who is	NOT an attorney to he	elp you fill out bankruptcy forms?	
☐ No				The state of the s	
☑ Yes.	Name of person	Veronica Eason		Attach Bankruptcy Petition Preparer's Notice, Declar	ration and
				Signature (Official Form 119).	anon, and
Under po that they	enalty of perjur are true and c	y, I declare that I have orrect.	read the summary and	d schedules filed with this declaration and	
, ,					
×MI	Sun A	Sign.	×		
Signature	of Debtor 1	· SAUL	Signature of I	Debtor 2	
Date	97717				
MM	DD / YYYY		Date	O / YYYY	

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Debtor 2 Spouse, if filing) Firs United States Bank Case number (If known) fficial Fortatement as complete a	rm 107	cial Affa				Check if this is a amended filing
pouse, if filing) First inited States Bank ase number known) fficial For atemen as complete au rmation. If me aber (if known	rm 107 It of Finance of the second of the s	Cial Affa	of Illinois			
Ficial For atemen s complete a mation. If mo	m 107 It of Finance Indiaccurate as positive space is needed	cial Affa				
icial For atemen s complete a mation. If mo	nt of Finance nd accurate as pos ore space is neede	sible. If two ma	irs for Indi			
ficial For atemen s complete a mation. If mo ber (if known	nt of Finance nd accurate as pos ore space is neede	sible. If two ma	irs for Indi			
atemen s complete a mation. If mo per (if known	nt of Finance nd accurate as pos ore space is neede	sible. If two ma	irs for Indi			•
atemen s complete a mation. If mo per (if known	nt of Finance nd accurate as pos ore space is neede	sible. If two ma	irs for Indi			
atemen s complete a mation. If mo ber (if known	nt of Finance nd accurate as pos ore space is neede	sible. If two ma	irs for Indi			
s complete a mation. If mo ber (if known	nd accurate as pos ore space is neede	sible. If two ma	irs for indi			
mation. If mo	ore space is neede	sible. If two ma				
Def (if known). Answer every qu	n attach a sen:	arried people are filin	ng together, both are equa	ally responsible for supply	ing correct
d 4 Give		estion.	arate sheet to this to	rm. On the top of any add	litional pages, write your n	ame and case
City City						
ICIA GIVE	Details About Yo	our Marital S	tatus and Where	ou Lived Before		
What is your	current marital stat	ue?				
	content markar stat	uo:				
☐ Married ☐ Not marrie	ard					
Debtor 1		ived in the last 3	B years. Do not includ Dates Debtor 1 lived there	e where you live now. Debtor 2:		Dates Debtor 2
				Same as Debtor 1		☐ Same as Debtor
			From			From
Number	Street		То	Number Street		From To
						10

City	St	ate ZIP Code		City	State ZIP Code	
				Same as Debtor 1		Same as Debtor
			_ From			From
Number	Street		То	Number Street	V	To
		·	****			
City	Sta	ate ZIP Code		City	State ZIP Code	
	: 8 vears, did you e	ver live with a s	snouse or legal equi	valent in a community pro	perty state or territory? (C	Community and a second
Within the last	tories include Arizon	a, California, Ida	aho, Louisiana, Nevad	la, New Mexico, Puerto Ric	o, Texas, Washington, and	Wisconsin.)
states and term						
states and term ✓ No			odebtors (Official Forr			

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btor 1		Davis st Name	Case nu	ımber (if known)	
FII	d you have any income from employme i in the total amount of income you receive you are filing a joint case and you have inc	ed from all jobs and all bus	sinesses, including part-ti	me activities	endar years?
1	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$34,844.00	Wages, commissions, bonuses, tips	\$
	For last calendar year:	Wages, commissions, bonuses, tips	s 7,938.00	Operating a business Wages, commissions,	
	(January 1 to December 31, 2015	Operating a business	\$	bonuses, tips Operating a business	\$
	For the calendar year before that:	Wages, commissions, bonuses, tips	\$ 7,428.00	Wages, commissions, bonuses, tips	
	(January 1 to December 31, 2014	Operating a business	\$	Operating a business	\$
gam List	mployment, and other public benefit payn abling and lottery winnings. If you are filing each source and the gross income from a No Yes. Fill in the details.	g a joint case and you have	e income that you receive	ed together, list it only once	under Debtor 1.
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:		\$		\$
	For last calendar year:		\$		e
	(January 1 to December 31,2015)		\$		\$
	For the calendar year before that:	9	Б		\$
	(January 1 to December 31, 2014)				

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Debtor 1	Mona		L.	Da	avis		Casan	umber (it known)		
	First Name	Middle Name		Last Name			Case	uilibei (irknown)		***************************************
Part 3:	List Certa	in Payment	s You	Made Bef	ore You File	d for Bank	cruptcy			
6. Are eit	her Debtor 1'	's or Debtor 2	?'s deb	ts primarily	consumer de	bts?				
☐ No.		ari araiviadai	pinnai	ny ioi a persi	ла, атпу, ог	nousenoid p	umer debts are Durpose."			11(8) as
	During the 9	90 days before	e you fil	led for bankrı	uptcy, did you	pay any cred	litor a total of s	66,425* or mo	ore?	
	☐ No. Go	to line 7.								
	1010	ai aimount you	paku u	iai Gibuilui. L	zo noi include:	payments to	more in one o r domestic sup attorney for th	nact abligation	ma allah as	
	* Subject to	adjustment or	1 4/01/1	19 and every	3 years after t	hat for cases	filed on or aft	is parikruptcy er the date o	rcase. Fadiustment	
☑ Yes		Debtor 2 or i							aajaatiiione.	
	During the 9	0 days before	you file	ed for bankru	ptcy, did you p	oav anv cred	itor a total of \$	600 or more?	,	
	☑ No. Go t					•	•			
			raditar	to whom was	majal — 1-1-1					
	Cici	GILOL DO HOL II	MUUUU	Javiments for	domestic sub-	nort obligatic	re and the tota ons, such as ch	ild augannt a	paid that	
	alin	nony. Also, do	not inc	lude paymer	its to an attorn	ey for this ba	ankruptcy case			
					Dates of payment	Total amo	ount paid	Amount you	ı still owe	Was this payment for
	<u></u>					\$	0.00	\$	0.00	
	Creditor's	Name				*		Ψ		Mortgage
	Number	Street								☐ Car☐ Credit card
										Loan repayment
	***************************************		***************************************		***************************************					Suppliers or vendors
	City	Stat	te	ZIP Code						Other
						\$	0.00	\$	0.00	m
	Creditor's f	Name	· · · · · · · · · · · · · · · · · · ·			· 	***	Y		☐ Mortgage ☐ Car
	Number	Street								☐ Credit card
	, rainbu	Oli Oct								Loan repayment
	***************************************									Suppliers or vendors
	City	State		ZIP Code						Other
										÷
	Creditor's N	lame				\$	0.00	\$	0.00	☐ Mortgage
										☐ Car
	Number 5	Street								Credit card
				· · · · · · · · · · · · · · · · · · ·						Loan repayment
										Suppliers or vendors
	City	State		ZIP Code						Other

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Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.	tor 1	Mona First Name		<u>L</u>		avis			Case n	umhec (V) known	
City State 2P Code S 0.00 \$ 0.00 City State 2P Code City State 2P Code S 0.00 \$ 0.00 City State 2P Code City State 2P Code S 0.00 \$ 0.00 City State 2P Code		rasi Name	Middle Name		Last Name				0400 11	arrioer (maroun	
Dates of payment Total amount pour still owe Number Street	corpoi agent, such a	rations of which , including one as child suppor	n you are an for a busine t and alimon	officer, off	ai pariners; director, per	relatives of an	y general	partners; of 20% or	partners	hips of which	ch you are a general partner;
Number Street State ZIP Code Support State Support Su	,	and an paym	ionio to ami	iside).				amount		unt you still	Reason for this payment
State ZIP Code Stat	Ĩŕ	nsider's Name					\$	0.00	\$	0.00	
Insider's Name Number Street	Ñ	lumber Street									
Number Street City State ZiP Code hin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefiter insider? ude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still own we Include creditor's name Dates of payment paid Dates of payment Dat	Ci	ity		State .	ZIP Code					:	
hin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider? ude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of Total amount Amount you still owe Include creditor's name Dates of Payment Paid Owe 0.00 Insider's Name Street City State ZIP Code \$ 0.00 \$ 0.00	Ins	sider's Name					\$	0.00	\$	0.00	
hin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefiter insider? ude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of Total amount Amount you still owe Include creditor's name Dates of payment paid owe 0.00 \$ 0.00 Insider's Name State ZIP Code \$ 0.00 \$ 0.00	Nu	umber Street				*******************************				:	
hin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited insider? Insider's Name Dates of Total amount Amount you still Reason for this payment Include creditor's name											
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btor 1	Mona First Name	L. Middle Name Last Name	Davis	Case number (it kno	wo)	V
	rustivarre	Middle Name Last Name	i e			
art 4	Identify Leg	al Actions, Reposses	sions, and Foreclosi	ures		
With	in 1 year before y	ou filed for bankruptcy,	were you a party in any	/ lawsuit, court action, or adn	ninistrative pro	ceeding?
LIST	all such matters, in- contract disputes.	cluding personal injury cas	ses, small claims actions	s, divorces, collection suits, pate	ernity actions, su	ipport or custody modifica
A						
☐ Y	es. Fill in the detai	ils.				
		N	ature of the case	Court or agency		Status of the cas
	Casa titla					<u></u>
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	es. Fill in the inform	allon bolow.	Describe the prope	nut.	.	
			bescribe the prope	er ty	Date	Value of the property
	Creditor's Name		_			\$
	Ground a register					
	Number Street		Explain what happe	ened		
			Property was	repossessed.		
	***************************************		Property was			
	City	State ZIP Code		garnished. attached, seized, or levied.		
	emigrofiningsparine i, e.e. mily 135 - Armi	ere annu partere annu e propositi il este e e e e e e e e e e e e e e e e e	Describe the prope	The second of th	Date	Value of the property
	O42-1-0					\$
	Creditor's Name		:		:	
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	A. A. A. A. A. A. A. A. A. A. A. A. A. A		Property was	repossessed.		
			☐ Property was			
	City	State ZIP Code	Property was	_		
			Property was	attached, seized, or levied.		

Case 17-00551 Doc 1 Filed 01/09/17 Entered 01/09/17 14:44:31 Page 46 of 54 Document Mona Debtor 1 Davis Case number (if known)_ 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☑ No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name 0.00 Number Street State ZIP Code Last 4 digits of account number: XXXX-____ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☑ No ☐ Yes **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts 0.00 Person to Whom You Gave the Gift 0.00 Number Street City ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts 0.00 Person to Whom You Gave the Gift 0.00 Number Street City State ZIP Code

Person's relationship to you _

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Yes. Fill in the details for each gift or c			
	ontribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
	:	3	\$
Charity's Name			\$
			V
Number Street			
City State ZIP Code			
List Certain Losses			
how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost
		-	\$
	nsfers		
List Certain Payments or Tra	····		
hin 1 year before you filed for bankru	ptcy, did you or anyone else acting on your behalf pay or tran	sfer any property	y to anyone
hin 1 year before you filed for bankru u consulted about seeking bankruptcy ude any attorneys, bankruptcy petition p			y to anyone
hin 1 year before you filed for bankru i consulted about seeking bankruptcy dude any attorneys, bankruptcy petition p	or preparing a bankruptcy petition?		y to anyone
hin 1 year before you filed for bankru i consulted about seeking bankruptcy ude any attorneys, bankruptcy petition p No Yes. Fill in the details. Veronica Eason	or preparing a bankruptcy petition?		y to anyone Amount of pay
thin 1 year before you filed for bankru u consulted about seeking bankruptcy lude any attorneys, bankruptcy petition p No Yes. Fill in the details.	y or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in yo	ur bankruptcy. Date payment or transfer was	
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hin 1 year before you filed for bankru i consulted about seeking bankruptcy ude any attorneys, bankruptcy petition p No Yes. Fill in the details. Veronica Eason Person Who Was Paid 9212 South Stony Island Number Street Chicago IL 60617	y or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in you Description and value of any property transferred	ur bankruptcy. Date payment or transfer was	Amount of pay

Debtor 1

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		st Name	Case number (il known)_		
And has able to the service and the service an			-		
001Daht		Description and value of any proj	perty transferred	Date payment or transfer was made	Amount of payment
001Debtorcc Person Who Was Paid	···	Credit Counseling	And the state of the second was a proper for the second		p.mj.meme
372 Summit Ave		- Touris of the state of the st		1/4/2017	\$
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					\$
Jersey City NJ	07306				
City State					
Debtorcc.org					
Email or website address		**			
Parson Mine Made the D					
Person Who Made the Payment, if	Not You				
No Yes. Fill in the details.		Description and value of any prope	rty transferred	Date no.	
		tulae of any prope	rty transferred	Date payment or transfer was	Amount of pay
Person Who Was Paid			the second of the second of the second	made	
Number Street					s (
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		cy, did you sell, trade, or otherwi usiness or financial affairs?			
hin 2 years before you filed nsferred in the ordinary cou ude both outright transfers an	for bankrupte	cy, did you sell, trade, or otherwiusiness or financial affairs? ade as security (such as the grantine already listed on this statement. Description and value of property transferred	g of a security interest or mo Describe any property or or debts paid in exchang	rigage on your prop	n property
nin 2 years before you filed isferred in the ordinary counder both outright transfers and include gifts and transfers	for bankrupte	page as security (such as the granting already listed on this statement. Description and value of property transferred	g of a security interest or mo Describe any property or	rigage on your prop	n property erty). Date transfe
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II in the details.				
	last 4 digits of account number	Tuno of passint as	D-4	
	rest 4 digits of account number	instrument	closed, sold, moved,	Last balance before closing or transfer
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Financial Institution	XXXX	Checking		s 0.00
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	Mona First Name Midd	L. Ile Name La	Davis st Name	Cas	e number (if known)	
2.Have ⊠Í∧		in a storage uni	t or place other than your ho	me within 1 year	before you filed for ban	kruptcy?
	es. Fill in the details	,	Who else has or had access	to it?	Describe the contents	Do you still have it?
	Name of Storage Facility		Name			□ No □ Yes
	Number Street		Number Street			
	City	State ZiP Code	City State ZIP Code			
Part 9	Identify Prop	erty You Hold	or Control for Someone	Eise		
	old in trust for some	• • •	someone else owns? Include	any property yo	ou borrowed from, are st	oring for,
.	Yes. Fill in the details	5.	Where is the property?		Describe the property	Value
	Owner's Name					\$0.00
	Number Street		Number Street			
						
	City	State ZIP Code	City State	e ZIP Code		
	Give Details	About Environ	mental Information	e ZIP Code		
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or the Envi haza incli	purpose of Part 10, 1 ironmental law mean ardous or toxic subst uding statutes or reg means any location,	About Environ the following def is any federal, sta tances, wastes, o ulations controll facility, or prope	mental Information initions apply: ate, or local statute or regulator material into the air, land, s	tion concerning soil, surface wat stances, wastes	er, groundwater, or othe or material.	r medium,
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E Environment Envi	purpose of Part 10, to ironmental law mean ardous or toxic substituding statutes or regumeans any location, are it or used to own, ardous material means tance, hazardous mall notices, releases, any governmental urano.	About Environ the following def as any federal, sta tances, wastes, culations controll facility, or prope operate, or utiliz ns anything an el laterial, pollutant and proceedings hit notified you th	imental Information initions apply: ate, or local statute or regulate, or material into the air, land, so ing the cleanup of these substanty as defined under any envelone it, including disposal sites. Invironmental law defines as a contaminant, or similar terms that you know about, regard at you may be liable or poter Governmental unit	tion concerning soil, surface wat stances, wastes, ironmental law, a hazardous was a. dless of when th	er, groundwater, or othe or material. whether you now own, o ste, hazardous substance ey occurred. er or in violation of an er	r medium, operate, or e, toxic ovironmental law?

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tor 1	Mona	L.	Davis	Case number (# Known)	
	First Name	Middle Name	Last Name		
		ny governmental ι	unit of any release of hazardous mate	rial?	
Z	No Yes. Fill in the o	at . a 72 .			
unuil	tes. Fin in the C	ietalis.	Construence and all the it	-	
			Governmental unit	Environmental law, if you know it	Date of notice
	Name of site		Governmental unit	'	
	Number Street		Number Street	<u></u>	
	Trained Officer		Number Street		
			City State ZIP Code		
			State Zir Code		
	City	State ZIP Co	de		
av	a vou been a na	rty in any indicial	or administrativo procoedino undor a	iny environmental law? Include settlement	
<u> </u>		ity in any judician	or administrative proceeding under a	ny environmentariaw? include settlement	s and orders.
	No Yes. Fill in the d	lataila			
	165. FIII III LIIE C	letails.			Status of the
			Court or agency	Nature of the case	case
(Case title				·
			Court Name		Pending
					On appea
			Number Street		Conclude
7	Case number	Section 1.			
`	Jase Humber		City State ZIP C	ode	
[A member of A partner in A partner in D	f a limited liability of a partnership irector, or managir	yed in a trade, profession, or other a company (LLC) or limited liability paring executive of a corporation	tnership (LLP)	
Ţ	An owner of	at least 5% of the	voting or equity securities of a corpo	ration	
ZÍ N	lo. None of the	above applies. Go	to Part 12.		
_			d fill in the details below for each bu	siness.	
			Describe the nature of the busine	Employer Identification	number
	Business Name			Do not include Social Se	curity number or ITIN.
				EIN:	
	Number Street	http://www.darana.com.com.com.com.com.com.com.com.com.com			
			Name of accountant or bookkeep	er Dates business existed	
			 :		
		20.00	· ·	From To	
	City	State ZIP Cod	Describe the nature of the busine	ss Employer Identification r	umber
				Do not include Social Se	
	Business Name		:		-
	No. about Minary	<u></u>	retainmentum .	EIN:	
	Number Street		Name of accountant or bookkeep	er Dates business existed	

				From To _	
		7/1		110111 10 _	

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	ona	L.	Davis	Case number	f til known
Fire	st Name Middle Nam	ne Last N	vame	0400 ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(and the second
			Describe the nature of the busin		Employer Identification number
			Describe the nature of the push		Do not include Social Security number or ITIN.
Busine	ss Name				
			:		EIN:
Numbe	r Street		Name of accountant or bookkee	ner	Dates business existed
					Dates pusitiess existen
	· · · · · · · · · · · · · · · · · · ·				
					From To
City	Stat	e ZIP Code	:		
		•			
North and a Home Paristic on the Control of the State of	والمراوية والمراوية والمراوية المراوية والمراوية والمراوية والمراوية والمراوية والمراوية والمراوية والمراوية و	and the second s	بران ميهوسوم مان الساب والسابق ما منواصق بها والإمان المان والمعاملة والمعاملة بعجا المعاملة المعام السابة	**************************************	CONTROL OF CONTROL OF A CONTROL
			tcy, did you give a financial stat	ement to anyone at	bout your business? Include all financial
institutions	s, creditors, or oth	er parties.			
2 No					
Yes. Fil	ll in the details bel	low.			
			5		
			Date issued		
Name			***************************************		
rame			MM / DD / YYYY		
·····					
Number	r Street				
City	State	ZIP Code			
,					
Part 12: Si	gn Below				
I have read	d the answers on	this Statement	of Financial Affairs and any att	achments, and I dec	clare under penalty of perjury that the
I have read	d the answers on	ct. I understand	l that making a false statement,	concealing propert	ty, or obtaining money or property by fraud
I have read answers a in connec	d the answers on	ct. I understand iptcy case can	of Financial Affairs and any att I that making a false statement, result in fines up to \$250,000, o	concealing propert	ty, or obtaining money or property by fraud
I have read answers a in connec	d the answers on a are true and correction with a bankru	ct. I understand iptcy case can	l that making a false statement,	concealing propert	ty, or obtaining money or property by fraud
I have read answers a in connec	d the answers on a are true and correction with a bankru	ct. I understand iptcy case can	I that making a false statement, result in fines up to \$250,000, o	concealing propert	ty, or obtaining money or property by fraud
I have read answers a in connec	d the answers on a are true and correction with a bankru	ct. I understand iptcy case can	l that making a false statement,	concealing propert	ty, or obtaining money or property by fraud
I have read answers a in connect 18 U.S.C.	d the answers on a are true and correction with a bankru	ct. I understand iptcy case can	I that making a false statement, result in fines up to \$250,000, o	concealing propert r imprisonment for	ty, or obtaining money or property by fraud
I have read answers a in connect 18 U.S.C.	d the answers on a tre true and correction with a bankru §§ 152, 1341, 1519	ct. I understand iptcy case can	I that making a false statement, result in fines up to \$250,000, o	concealing propert r imprisonment for	ty, or obtaining money or property by fraud
I have read answers a in connect 18 U.S.C.	d the answers on a tre true and correction with a bankru §§ 152, 1341, 1519	ct. I understand iptcy case can	I that making a false statement, result in fines up to \$250,000, o	concealing propert r imprisonment for	ty, or obtaining money or property by fraud
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I have read answers a in connect 18 U.S.C. Signatu	d the answers on are true and correction with a bankru §§ 152, 1341, 1519	et. I understand uptcy case can it, and 3571.	I that making a false statement, result in fines up to \$250,000, o	concealing propert r imprisonment for otor 2	ty, or obtaining money or property by fraud
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I have read answers a in connect 18 U.S.C. Signatu Date Did you at No Yes Did you pa	d the answers on are true and correction with a bankru §§ 152, 1341, 1519 The of Debtor 1 The of Debtor 1 The of Additional particles additional particles are true and the correction of the	et. I understand aptry case can and 3571.	I that making a false statement, result in fines up to \$250,000, o	concealing propert r imprisonment for otor 2	ty, or obtaining money or property by fraud up to 20 years, or both. or Bankruptcy (Official Form 107)?
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Fill in this in	formation to i	dentify your case:		
Debtor 1	Mona First Name	L . Middle Name	Davis Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Cour	t for the: Northern District of	Illinois	
Case number (if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

1. For any graditors that you listed in Bort 4 of Schoolule Dr. Craditors Who Have Claims Secured by Dranget (Official Form 400D) 50 in the

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C	
Creditor's name: Santander Consumer USA	Surrender the property.	No	
	Retain the property and redeem it.	Yes	
Description of Automobile: 2012 Nissan Altima property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
·	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	☑ No	
name:	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
g	Retain the property and [explain]:		
entermination de la company de la company de la company de la company de la company de la company de la company Creditor's	☐ Surrender the property.	W No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	☑ No	
name:	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	☐ Retain the property and [explain]:		

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Il in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet nded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).				
Describe your unexpired personal property leases	Will the lease be assumed?			
Lessor's name:	₩ No			
Description of leased property:	Yes			
Lessor's name:	☑ No			
Description of leased property:	☐ Yes			
essor's name:	☑ No			
Description of leased property:	Yes			
essor's name:				
rescription of leased roperty:	Yes			
essor's name:	₩ No			
escription of leased roperty:	☐ Yes			
essor's name:	No			
escription of leased operty:	Yes			
essor's name:				
escription of leased operty:	Yes			
Sign Below				
er penalty of perjury, I declare that I have indicated my intention about sonal property that is subject to an unexpired lease.	ut any property of my estate that secures a debt and any			

Date MM / DD / YYYY